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COVER LETTER

TO:

Registration Section

Div	ision of Corporation	18			1	
SUBJECT:	Apollo Mortgage, L	LC				
		Name of Limited Liability Company				
The enclosed Existence, ar	d "Application by For nd check are submitte	eign Limited Liability Comp d to register the above refere	any for Authoriza nced foreign limit	tion to Tra ed liabilit	ansact Business in Florida," Coy company to transact business	ertificate of s in Florida.
Please return	all correspondence of	concerning this matter to the	following:			
	Suzanne Weav	er				
		Name of Person				
	Movement Mo	rtgage, LLC			1	
	Firm/Company					
	575 Lynnhaven Pkwy, Ste 102					
	Address					
	Virginia Beach	. VA 23452				
	City/State and Zip Code					
	jvteam@movem					
		E-mail address: (to be used	for future annual	report no	tification)	
For further in	nformation concernin	g this matter, please call:			1	
Su	zanne Weaver		844 at (283-92	 74 	
	Name (of Contact Person	Area Code	Day	time Telephone Number	
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahassee, FL 32314			Division Registrat Clifton E 2661 Exc	CADDRESS: of Corporations ion Section uilding ecutive Center Circle sec. FL 32301	
	a check for the follow \$125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Certi of Status & Certified Copy	ificate

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 Apollo Mortgage, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "ELC.") If name unavailable, enter alternate pany: adopted for the purpose of transacting business in Florida. The alternate pany: include "Lamited Liability Congruy," "L.L.C." or "LLC.") 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 6. 575 Lynnhaven Pkwy, Ste 102 575 Lynnhaven Pkwv, Ste 102 (Street Address of Principal Office) (Mailing Address) Virginia Beach, VA 23452 Virginia Beach, VA 23452 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) Registered agent's acceptance: Having heen named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Corporation Service Company By: (Remarked agent's signalize) Olivia Mahach, Authorized Representative 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/arc: Name and Address: Title or Capacity: Title or Capacity: Name and Address: William Harris President 575 Lynnhaven Pkwy, Ste 102 Virginia Beach, VA 23452 CEO Casey Crawford 8624 Calvin Hall Rd indian Land, SC 29707 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605,0303 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for to \$.817.155, F.S. William Harris, President

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "APOLLO MORTGAGE, LÎC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE FIRST DAY OF NOVEMBER, A.D. 2018.

7128550 8300

SR# 20187415792

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Bullock, Secretary of State

Authentication: 203818999

Date: 11-01-18